

POSITION	INITIALS	ID NO.	DATE
	<i>AS</i>		<i>08/04/07</i>
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>DR</i>	<i>32</i>	<i>8/10</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	<i>AB</i>	<i>54222</i>	<i>9-11-00</i>

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

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If more than 150 claims or 10 actions  
staple additional sheet here

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